



## PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)

Docket No.  
416272061200

In re Application of Vicki L. CHANDLER

Application Number Filed

09/972,805

October 5, 2001

For: GENETIC FUNCTIONS REQUIRED FOR GENE SILENCING IN  
MAIZE

Group Art Unit 1638 Examiner A. D. Mehta

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate non-small-entity fee are as follows  
(check time period desired):

- |   |          |
|---|----------|
| <input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1)) | \$ 110   |
| <input type="checkbox"/> Two months (37 CFR 1.17(a)(2))           | \$ _____ |
| <input type="checkbox"/> Three months (37 CFR 1.17(a)(3))         | \$ _____ |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4))          | \$ _____ |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5))          | \$ _____ |

**Applicant claims small entity status.** See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ 55.00

- A check in the amount of the fee is enclosed.  
 Payment by credit card. Form PTO-2038 is attached.  
 The Commissioner has already been authorized to charge fees in this application to a Deposit Account.

**The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account 03-1952**

I have enclosed a duplicate copy of this sheet. Fee Transmittal Form PTO/SB/17 is attached to this submission in DUPL.

- I am the  applicant/inventor.  
 assignee of record of the entire interest. See 37 CFR 3.71.  
 Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).  
 attorney or agent of record.  
 attorney or agent under 37 CFR 1.34(a).

Registration number if acting under 37 CFR 1.34(a)

November 12, 2003

Date

Signature

Michael R. Ward (38,651)

Typed or Printed Name

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below



1 forms are submitted.



Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

# FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

**TOTAL AMOUNT OF PAYMENT** **(\$)** **55.00**

## Complete if Known

Application Number	09/972,805
Filing Date	October 5, 2001
First Named Inventor	Vicki L. CHANDLER
Examiner Name	A. D. Mehta
Art Unit	1638
Attorney Docket No.	416272061200

## METHOD OF PAYMENT (check all that apply)

Check  Credit Card  Money Order  Other  None

Deposit Account:

Deposit Account Number **03-1952**

Deposit Account Name **Morrison & Foerster LLP**

The Director is authorized to: (check all that apply)

Charge fee(s) indicated below  Credit any overpayments

Charge any additional fee(s) or any underpayment of fee(s)

Charge fee(s) indicated below, except for the filing fee

to the above-identified deposit account.

## FEE CALCULATION (continued)

### 3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)
1051	130	2051	65
1052	50	2052	25
1053	130	1053	130
1812	2,520	1812	2,520
1804	920*	1804	920
1805	1,840*	1805	1,840*
1251	110	2251	55
1252	420	2252	210
1253	950	2253	475
1254	1,480	2254	740
1255	2,010	2255	1,005
1401	330	2401	165
1402	330	2402	165
1403	290	2403	145
1451	1,510	1451	1,510
1452	110	2452	55
1453	1,330	2453	665
1501	1,330	2501	665
1502	480	2502	240
1503	640	2503	320
1460	130	1460	130
1807	50	1807	50
1806	180	1806	180
8021	40	8021	40
1809	770	2809	385
1810	770	2810	385
1801	770	2801	385
1802	900	1802	900
Other fee (specify)			
SUBTOTAL (1) <b>(\$)</b> <b>00</b>		SUBTOTAL (3) <b>(\$)</b> <b>55.00</b>	

\*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) **(\$)** **55.00**

\*\*or number previously paid, if greater; For Reissues, see above

(Complete if applicable)

SUBMITTED BY			
Name (Print/Type)	<b>MICHAEL R. WARD</b>	Registration No. (Attorney/Agent)	<b>38,651</b>
Signature	<i>Michael R. Ward</i>	Telephone	<b>415/268-6237</b>
		Date	<b>November 12, 2003</b>